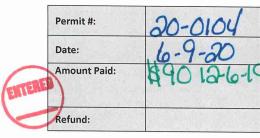
SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

**Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

### **APPLICATION FOR PERMIT**





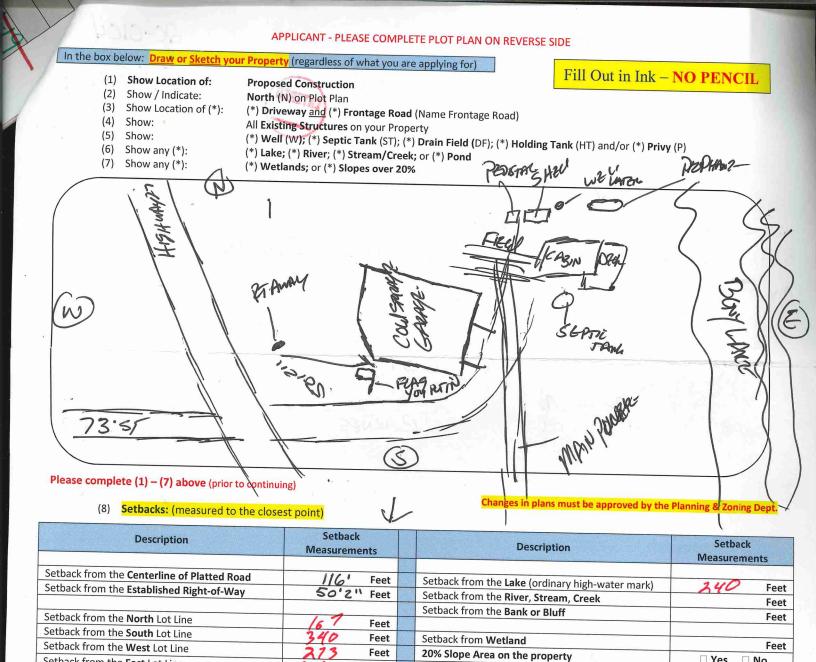
| Checks are made p   | ayable to: E    | Bayfield Co                             | ounty Zoning  | Department.  | TO API              | B <mark>ayfield Co, Zo</mark><br>Plicant. Orig | oning<br>inal A | Dept.                           | JST be submitted  | FILL (  | OUT IN INK (                  | NO PI         | ENCIL)                    |
|---|-----------------|---|---|--|---------------------|--|-----------------|---------------------------------|---|---|-------------------------------|---------------|---------------------------|
| TYPE OF PERMIT  | T REQUES        | TED-                                    | T X   | LAND USE   | SANI                | TARY   PRIV                                    | ΥΓ              | CONDITION                       | NAL USE   SPECIA  | AL LISE   | □ B.O.A.                      | □ OTH         | JED                       |
| Owner's Name:   | WANS            |   | F   |  | Mail                | ing Address:<br>US ME-9                        |                 |                                 | City/State/Zip: AUgonayi  |   | 60102                         | E POSTORIO DE | hone:                     |
| Address of Proper 50910   | HISH            | MAY                                     | 27  | - 1  |                     | City/State/Zip:<br>BARNZ                       |                 | WI                              | 5487  | 3   |                               | Cell P        | bone:<br>7 366-447        |
| My SEU  | 2               |   |   |  |                     | ractor Phone:<br>7- 366 -447                   | 7               | Plumber:                        |   |   |                               | Plum          | ber Phone:                |
| Authorized Agent  |                 | ning Applic                             | ation on beha                                       | alf of Owner(s))   | -                   | nt Phone:                                      |                 | Agent Maili                     | ing Address (include Ci   | ty/State/Zi                                     | p):                           | Attac         | orization                 |
| PROJECT<br>LOCATION   | Legal           | Descript                                | ion: (Use 1   | Fax Statement)   |                     | Tax ID# 16                                     | 3               | 9 Z                             | <u>.</u>  | Recorde   | ed Document:                  | (Showin       | g Ownership)              |
| 1/4, _  | :               | 1/4                                     | Gov't Lot   | Lot(s)   | CSM                 | Vol & Page                                     | CSM             | Doc# Lo                         | ot(s) # Block #   | Subdivis  | sion:                         |               |                           |
| Section 08  | , Tow           | nship <u>4</u>                          | <u>'4</u> N, F                                      | Range <u>69</u>  | W                   | Town of:                                       | 30              | ARNBS                           |   | Lot Size  |                               | Ac            | reage.                    |
| Shoreland -   | Cree            | Property,<br>k or Land                  | Land withi  | n 300 feet of Riv<br>of Floodplain?  |                     | eam (incl. Intermitte                          |                 | Distance Stru                   | cture is from Shoreli   | ine :<br>_ feet                                 | Is your Prope<br>in Floodplai |               | Are Wetlands Present?     |
| M Shoreland -   |                 | Property                                | Land withi  | n 1000 feet of La  |                     | nd or Flowage<br>/escontinue –                 | •               | Distance Stru                   | cture is from Shoreli   | ne :<br>_ feet                                  | Zone?  Yes No                 |               | □ Yes<br><b>X</b> No      |
| ☐ Non-Shorelan  | d               |   |   |  |                     |  |                 |                                 |   |   |                               |               |                           |
| Value at Time<br>of Completion<br>* include<br>donated time<br>& material |                 | Project                                 |   | Project<br># of Stories  | S                   | Project<br>Foundation                          |                 | Total # of bedrooms on property | Sewer/  | the prop  | System(s)                     |               | Type of Water on property |
|   | X New           | Constru                                 | ction   | X 1-Story  | [                   | Basement                                       |                 | □ 1                             | ☐ Municipal/Ci  |   |                               |               | ☐ City                    |
| \$30,000  | ☐ Addit         | tion/Alt                                | eration   | ☐ 1-Story +<br>Loft  | [                   | Foundation                                     |                 | ☐ 2 ☐ (New) Sanitary            |   |   | Specify Type:                 |               | Well                      |
|   | □ Conv          | 100000000000000000000000000000000000000 | to seaw   | ☐ 2-Story  | _                   | ☐ Slab ☐ 3 Sanitary (Ex                        |                 |                                 |   |   |                               |               |                           |
|   |                 | ate (exis                               |   |  | 1000                | , Use  |                 | None                            | ☐ Privy (Pit) o   |   |                               | gallon        | )                         |
|   | Prope           |   |   |  | 7                   | Year Round                                     |                 | None                            | ☐ Portable (w/s   |   | tract)                        |               | -                         |
|   | GE              | HZA96                                   | =   | COLDSTRAM  | 72-                 |  | No.             |                                 | □ None  |   |                               |               |                           |
| Existing Structu  | ıre: (if add    | ition, alte                             | ration or bu  | siness is being ap   | plied fo            | r) Length:                                     |                 |                                 | Width:  |   | Height:                       |               |                           |
| Proposed Cons   | truction:       | (overal                                 | l dimensior   | IS) FRUM   | NE-                 | Length:  | 56              |                                 | Width: 36'  |   | Height:                       | 77            | L                         |
| Proposed I  | <b>Jse</b>      | <b>✓</b>                                | Duite aire al                                       | S  |                     | Proposed Stru                                  |                 | ·                               |   | Dir   | nensions                      |               | Square<br>Footage         |
| ,   |                 |   |   | e (i.e. cabin, hu  |                     | cture on proper                                | ty)             |                                 |   | 1   | X )                           | +-            |                           |
| Residentia  | ıl Use          |   |   | with Loft  |                     | onderly etery                                  |                 |                                 |   | (   | X )                           |               |                           |
| The residentia  | 030             |   |   | with a Porc  |                     |  |                 |                                 |   | (   | X )                           |               |                           |
|   | }               |   |   | with (2 <sup>nd</sup> ) P<br>with a Deck                                     |                     | 9  | Ψ.              |                                 |   | (   | X )                           |               |                           |
|   |                 |   |   | with (2 <sup>nd</sup> ) D  |                     |  |                 |                                 |   | 1   | X )                           | -             |                           |
| Commerci  | al Use          |   |   | with Attach  |                     | rage   |                 | 1                               |   | (   | x )                           |               | 4                         |
|   |                 |   | Bunkhou   | <b>se</b> w/ (□ sanitaı  | ry, <u>or</u>       | sleeping quart                                 | ers, <u>o</u>   | r 🗀 cooking &                   | food prep facilities)   | (   | х )                           |               | -                         |
|   |                 |   |   |  |                     | ate)   |                 |                                 |   | (   | х )                           |               |                           |
| ☐ Municipal   | Use             |   | Addition  | /Alteration (ex  | plain) <sub>.</sub> | 0.00   |                 | 2 () -                          |   | (   | X )                           |               |                           |
|   | _               | K                                       |   |  |                     | GARAGE   |                 | OldSTU                          | 2292 Persum   | 136   |                               | 2             | ,016                      |
|   |                 |   |   |  | 2011                | Alteration (exp                                | iain)           |                                 |   | (   | х )                           |               |                           |
| . 1   |                 |   |   | se: (explain)  |                     |  |                 |                                 |   | (   | X )                           |               |                           |
|   |                 |   | Other: (e)  |  | 1)                  |  |                 |                                 |   | (   | X )                           |               |                           |
|   |                 |   |   |  | Or CTAP             | TING CONSTRUCT                                 | 2012            | THOUT A TOTAL                   |   | 1 (   | х )                           |               |                           |
| (are) responsible for t   | inty relying or | this inform                             | y accompanyin<br>all information<br>ation I (we) am | g information) has bee<br>I (we) am (are) providi<br>(are) providing in or v | en examir           | ned by me (us) and to t                        | he best         | of my (our) knowle              | T WILL RESULT IN PENAL<br>edge and belief it is true, corr<br>termining whether to issue a<br>rged with administering cou | rect and comp<br>permit. I (we<br>nty ordinance | . \ £                         | - L-1114 1    | * I                       |
| Owner(s).   | WI W            |   | 200-4   | 1  |                     |  |                 |                                 |   | Date  |                               |               |                           |

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) Authorized Agent: Date

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Address to send permit 1215 MEGHAN

1-0102 Copy of Tax Statement If you recently purchased the property send your Recorded Deed

Attach



Feet Prior to the placement or construction of a structure within ten (10) feet of the minimum roother previously surveyed corner or marked by a licensed surveyor at the owner's expense. ary line from which the setback must be measured must be visible from one previ

Elevation of Floodplain

Setback to Well

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be

Feet

Feet

Feet

## (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction Of New One & Two Family Dwelling: <u>ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.</u>

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

| Issuance Information (County Use Only)  | Sanitary Number:      | 8-1455                                     | # of bedrooms: 2                                 | Sanitary Date:                           | 2/10/2                |
|---|-----------------------|--|--|--|-----------------------|
| Permit Denied (Date):   | Reason for Denial:    | 0.100                                      |  | 4  | 1/8/-                 |
| Permit #: 20-0104   | Permit Date:          | 7-20                                       |  |  |                       |
| Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes (Fused/Contiguence)   Yes (Fused/Contiguence) | ous Lot(s))           | Mitigation Required<br>Mitigation Attached | ☐ Yes ☐ No<br>☐ Yes ☐ No                         | Affidavit Required<br>Affidavit Attached | ☐ Yes ☐ No ☐ Yes ☑ No |
| Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:  |                       | Previously Granted by                      |  | e #:                                     |                       |
| Was Parcel Legally Created Was Proposed Building Site Delineated  ✓Yes □ No   |                       | Were Property Line                         | es Represented by Owner<br>Was Property Surveyed |  |                       |
| Inspection Record:  |                       |  | - Tuberty Surveyed                               | □ Yes                                    |                       |
| Date of Inspection  |                       | 1  |  | Zoning District Lakes Classificatio      | n (10/4)              |
| Date of Inspection: 1-7-20  | Inspected by:         | 1/   |  | Date of Re-Inspec                        | ction:                |
| Condition(s): Town, Committee or Board Conditions Attac   | hed? 🗆 Yes 🗆 No – (If | No they need to be atta                    | ched.)   |  |                       |
| Get Required  | WOO inc               | 10. Tiens                                  |  |  |                       |
| Not to be   | used for              | Human Hab                                  | tation on SI                                     | laca la                                  |                       |
| Signature of Inspector:   |                       | B Paris                                    | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,          | Date of Appro                            | val: [/4/h            |
| Hold For Sanitary:  Hold For TBA:   | Hold For Affid        | 10 10 m                                    | Hold For Fees:                                   |  | 0/1/10                |

Setback from the East Lot Line

Setback to Drain Field

Setback to Septic Tank or Holding Tank

Setback to Privy (Portable, Composting)

☐ Yes

38

No

Feet

Feet

## own, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY SIGN SPECIAL - X (ZC Mtg: 2/20/2020)
CONDITIONAL BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

| No.                               | 20                                    | -0104                                | í                            | ls                                 | ssued                 | То:                           | All                              | en S                                  | uwanski   |                  |                |               |          |       |              |                 |        |                |  |
|-----------------------------------|---------------------------------------|--------------------------------------|------------------------------|------------------------------------|-----------------------|-------------------------------|----------------------------------|---------------------------------------|---|------------------|----------------|---------------|----------|-------|--------------|-----------------|--------|----------------|--|
| Locatio                           | on: -                                 | 1/4                                  | of                           | -                                  | 1/4                   | Sect                          | ion                              | 8                                     | Townsh  | ip 4             | 14             | N.            | Range    | 9     | W.           | Towi            | n of   | Barnes         |  |
| <b>2 Par i</b><br>Gov't Lo        |                                       |                                      | Lot                          | (.                                 |                       |                               | Bloc                             | ck                                    |   | Subdi            | visior         | )             |          |       |              | cs              | 5M#    |                |  |
| For: <b>F</b><br>( <b>Disclai</b> | Resider<br>mer): A                    | itial A                              | ccess<br>e expa              | ory                                | Stru<br>s or de       | cture                         | e [ 1                            | - Sto                                 | ory, <u>Gara</u><br>I require add                   | ge in            | Cor            | nme<br>tting  | ercial Z | one ( | (56' x       | 36') =          | : 2,0° | 16 sq. ft.]    |  |
| Disclai                           | mer): A                               | ny futu                              | e expa                       | nsion                              | s or de               | evelopi                       | ment                             | would                                 | I require add                                       | litional         | permi          | tting.        |          |       |              |                 |        |                |  |
| Disclai<br>Condit                 | mer): A<br>tion(s):                   | Get mit expi                         | requires one                 | red l                              | S or de               | insp                          | ment<br>ecti                     | would<br>on. N                        | ory, Gara<br>I require add<br>Not to be             | litional<br>used | permi<br>for   | tting.<br>hum |          |       | on or        |                 | ing.   |                |  |
| Disclai                           | tion(s):  This per work or I  Changes | Get mit expi and use                 | requires one has no          | red I year f t begu                | UDC<br>from da        | insp<br>ate of is             | ecti ssuan                       | on. Note if the made we               | Not to be ne authorized                             | used d consti    | for<br>ruction | tting.<br>hum |          | itati | on or        | sleep<br>acy Po | oing.  |                |  |
| Disclai<br>Condit                 | tion(s):  This per work or I  Changes | Get mit expirand uses in planmit may | requires one has no sor spee | red I year f t begu cificat or rev | UDC<br>from da<br>in. | insp<br>ate of is<br>hall not | ections suant to be not find the | on. Note that the made was applicated | Not to be ne authorized vithout obtaination informa | used d consti    | for<br>ruction | tting.<br>hum |          | itati | on or<br>Tra | sleep<br>acy Po | oing.  | or<br>Official |  |

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT JUN 02 2020

Permit #: Date: Amount Paid: ENTERED

Authorized Agent: \_

Address to send permit 6000 SMITH LK RD

| DO NOT START CONSTRUCTION UNTIl | ALL | PERMITS HAVE BEEN | ISSUED TO | APPLICANT. |
|---------------------------------|-----|-------------------|-----------|------------|
|---------------------------------|-----|-------------------|-----------|------------|

| TYPE OF PERMIT RI                      |              |               | I D LAND               | USE SA                  | NITARY                   | □ PRIVY □  | CONDI                                    | TIONAL                      | USE   SPEC   | IAL USE                          | ☐ B.O.          | A. 🗆 O                        | THER                 |  |
|--|--------------|---------------|------------------------|-------------------------|--------------------------|--|--|-----------------------------|--|----------------------------------|-----------------|-------------------------------|----------------------|--|
| Owner's Name:                          |              |               | 1                      |                         |                          | Address:   | 2000000                                  |                             | ate/Zip:   |                                  |                 | Telephon                      | e:                   |  |
| APAIRS AREA                            | 111          |               | 45505                  | 107041                  |                          |  |  |                             |  |                                  |                 |                               |                      |  |
| Address of Property:                   |              | OKIGH         | L ASSOC                | IALION                  | City/St                  | ate/Zip:   |  |                             |  |                                  |                 | Cell Phon                     | e:                   |  |
|  |              |               | 1                      |                         |                          |  |  |                             |  |                                  |                 |                               |                      |  |
| 4545 CT                                | ( (4)        | W / N         |                        |                         | Contra                   | ctor Phone:  | Plumber:                                 |                             |  |                                  |                 | Plumber                       | Phone:               |  |
|  |              |               |                        |                         |                          |  |  |                             |  |                                  |                 |                               |                      |  |
| Authorized Agent: (Pe                  | erson Sign   | ing Applica   | ation on behalf        | of Owner(s))            | Agent I                  | Phone:   | Agent Ma                                 | iling Addr                  | ess (include City/S  |                                  | 973             | Written A                     | Authorization        |  |
| JOHN AN                                | MENI         |               |                        |                         | 715 7                    | 953133   | 6000                                     | SMIT                        | MH LKRD  | BARNE                            | S, WI           |                               |                      |  |
| PROJECT                                |              |               |                        |                         | PIN: (2                  | digits)  |  |                             |  | Recorded                         | Documer         | t: (i.e. Prop                 | erty Ownersh         |  |
| LOCATION                               | Legal        | Descript      | ion: (Use Ta           | ax Statement)           | 04-                      |  |  |                             |  | Volume _                         |                 | Page                          | (s)                  |  |
| SW 1/4,                                | SE           | 1/4           | Gov't                  | Lot Lot(                |                          |  | 11111                                    | ot(s) No.                   | Block(s) No.   | Subdivisi                        | on:             |                               |                      |  |
|  |              |               | 1,15                   |                         | 111                      | 7 71/7<br>Town of:   | 2  |                             |  |                                  |                 |                               |                      |  |
| Section 3                              | <u>4</u> ,т  | ownship       | 45 N                   | I, Range <u>9</u>       | w                        |  |  |                             |  | Lot Size                         |                 | Acrea                         | <del></del>          |  |
|  |              |               |                        |                         |                          | BA   | RNES                                     |                             |  |                                  |                 | 2-1                           | 76                   |  |
|  | ☐ Is F       | roperty       | /Land within           | 1 300 feet of Ri        | ver, Strea               | m (incl. Intermittent  | ) Distan                                 | ce Struct                   | ure is from Sho  |                                  | Is Pro          | perty in                      | Are Wetlar           |  |
| ☐ Shoreland →                          |              |               |                        | of Floodplain?          |                          | scontinue -  |  |                             |  | feet                             |                 | ain Zone?                     | Present?             |  |
| _ onorciand                            | ☐ Is P       | roperty       | /Land withir           | 1000 feet of L          |                          |  | 0.000                                    | nce Struct                  | ture is from Sho   |                                  |                 | Yes<br>No                     | ☐ Yes                |  |
|  |              | 4             |                        |                         | If ye                    | scontinue —  |  |                             |  | feet                             |                 |                               |                      |  |
| ☐ Non-Shoreland                        |              |               |                        |                         | W 1                      |  |  |                             |  |                                  |                 |                               |                      |  |
| Value at Time                          |              |               |                        | ling (Carlon            | rus ir i                 |  |  |                             | MARKET   | A STATE                          |                 |                               | G 19 7 32 11         |  |
| of Completion                          |              | Proje         | ct                     | # of Stor               | ies                      |  |  | #                           |  | What T                           |                 |                               |                      |  |
| * include                              |              | Projec        | Ct                     | and/or base             |                          | Use  |  | of                          |  | er/Sanit                         |                 | m                             | Wat                  |  |
| donated time & material                |              |               |                        |                         |                          |  | bear                                     | ooms                        | IS   | on the p                         | ropertyr        |                               |                      |  |
| Illaterial                             | □ Nev        | v Const       | ruction                | ☐ 1-Story               |                          | ☐ Seasonal   | □ 1                                      |                             | ☐ Municipal/   | City                             |                 |                               | ☐ Cit                |  |
|  | ☐ Add        | lition/A      | Iteration              | ☐ 1-Story -             | ⊦ Loft                   | ☐ Year Round   | d 🗆 2                                    |                             | □ (New) Sanitary Specify Type:   |                                  |                 |                               | W                    |  |
| 10,000.                                | ☐ Con        | version       | 1                      | ☐ 2-Story               |                          | MUSEUN   | 1 □ 3                                    |                             | 💢 Sanitary (E  |                                  |                 |                               |                      |  |
|  |              |               | xisting bldg)          | ☐ Baseme                |                          |  |  |                             | ☐ Privy (Pit) or ☐ Vaulted (mir  |                                  |                 | in 200 gallon)                | on)                  |  |
|  | 100          |               | ness on                | No Base                 |                          | <del></del>  | ≥ N                                      | one                         |  |                                  | rvice contract) |                               |                      |  |
|  | Pro          | perty         |                        | ☐ Foundat               | ion                      |  |  |                             | ☐ Compost T☐ None  | ollet                            |                 |                               |                      |  |
|  |              |               | *                      |                         |                          |  |  |                             |  |                                  |                 |                               |                      |  |
| Existing Structure                     | e: (if pe    | rmit beir     | ng applied fo          | r is relevant to        | it)                      | Length:  |  |                             | Width:   |                                  |                 | leight:                       |                      |  |
| Proposed Constru                       | uction:      |               |                        |                         |                          | Length:  |  |                             | Width:   |                                  | H               | leight:                       |                      |  |
|  | 27 446       |               |                        |                         |                          |  |  |                             |  | EUR PER                          | ā               | S. F.                         | Square               |  |
| Proposed Us                            | ie           | 1             |                        |                         |                          | Proposed Struc   | ture                                     |                             |  |                                  | Dimensi         | ons                           | Footage              |  |
|  |              |               | -                      |                         |                          | ure on propert   | у)                                       |                             |  | (                                | Х               | )                             |                      |  |
|  |              |               | Residenc               | e (i.e. cabin, h        | nunting s                | hack, etc.)  |  |                             |  | (                                | Х               | )                             |                      |  |
| □ <b>0</b> 1-11-1                      | 11           |               |                        | with Loft               |                          |  |  |                             | Manufasallinga in Madicilia  | (                                | X               | )                             |                      |  |
| Residential                            | use          |               |                        | with a Por              |                          |  |  |                             |  | - 1                              | X               | - '                           |                      |  |
|  |              |               |                        | with (2 <sup>nd</sup> ) |                          |  |  |                             |  | 1                                | X               | )                             |                      |  |
|  |              |               |                        | with (2 <sup>nd</sup> ) |                          |  |  | ,                           |  | 1                                | X               |                               | 1                    |  |
| ☐ Commercial                           | Use          |               |                        | with Attac              |                          | age  |  |                             |  | (                                | Х               | )                             |                      |  |
|  |              |               | Bunkhou                |                         |                          | sleeping quarte  | ers, or $\square$ co                     | ooking &                    | food prep faciliti   | es) (                            | Х               | )                             |                      |  |
|  |              |               |                        |                         |                          | te)  |  |                             |  | 1                                | Х               | )                             |                      |  |
|  |              |               |                        |                         |                          |  |  |                             |  | - (                              | Х               | )                             |                      |  |
| Municipal L                            | Jse          |               |                        |                         |                          |  |  |                             |  | (                                | Х               | )                             |                      |  |
| Accessory Building  Accessory Building |              |               |                        |                         |                          |  |  |                             |  | (                                | Х               | )                             |                      |  |
| _,,                                    |              |               | 7.13003301             | ,                       |                          |  | . , ,                                    |                             |  | -   `                            |                 |                               |                      |  |
|  |              |               | Special II             | se: (evolain)           |                          |  |  |                             |  | 1                                | Х               | )                             |                      |  |
|  |              |               | Special U              | and User (explain)      | ain)                     |  |  |                             |  | - 1                              | X               | )                             |                      |  |
|  |              |               | Condition              |                         | /                        |  |  |                             |  | - '                              |                 | ,                             |                      |  |
|  |              |               | Condition              | volain)                 | DIO                      | HOUSE-BI   | JILT LA                                  | TE 180                      | 0'5  | - (                              | 19 X            | 29-91                         |                      |  |
| <i>y</i>                               |              |               | Condition<br>Other: (e | xplain) OL              | DLOG                     | HOUSE-BI   |  |                             |  | . (                              | 18 X            | 28-81                         |                      |  |
| I (we) declare that this               | s applicatio | I I           | Other: (e              | xplain) OLD             | AIT or STAR              | TING CONSTRUCTION ined by me (us) and to   | ON WITHOU                                | T A PERMIT                  | T WILL RESULT IN P   | true, correct a                  | and complete    | . I (we) acknow               | wledge that I (we    |  |
|  | for the deta | in (including | Other: (e              | xplain)                 | AIT or STAR as been exam | TING CONSTRUCTION  TING CONSTRUC | ON WITHOUT<br>the best of med upon by Ba | T A PERMIT<br>ny (our) knov | T WILL RESULT IN P<br>wledge and belief it is<br>ty in determining whe | true, correct a<br>ther to issue | and complete    | . I (we) acknowe) further acc | cept liability which |  |

BARNES,

WI

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date <u>5-27-20</u>

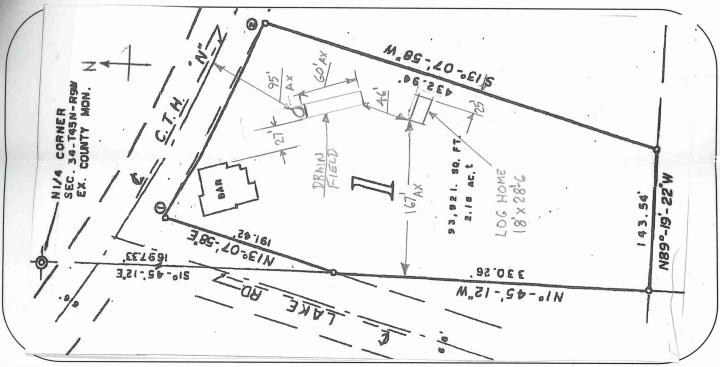
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

**Attach** 

#### ow: Draw or Sketch your Property (regardless of what you are applying for)

- Show Location of:
- **Proposed Construction**
- Show / Indicate: (3) Show Location of (\*):
- North (N) on Plot Plan
- (4) Show:
- (\*) Driveway and (\*) Frontage Road (Name Frontage Road) All Existing Structures on your Property
- (5) Show:
- (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
- Show any (\*): (6)
- (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (\*) Wetlands; or (\*) Slopes over 20%

(7) Show any (\*):



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

#### (8) Setbacks: (measured to the closest point)

| Description                                 | Measurement |      |     | Description   | Measu | rement |
|---|-------------|------|-----|---|-------|--------|
| Setback from the Centerline of Platted Road | Ax 200'     | Feet |     | Setback from the <b>Lake</b> (ordinary high-water mark) |       | Feet   |
| Setback from the Established Right-of-Way   | AX 167'     | Feet |     | Setback from the River, Stream, Creek                   |       | Feet   |
|   |             |      |     | Setback from the Bank or Bluff                          |       | Feet   |
| Setback from the <b>North</b> Lot Line      | AX 200      | Feet |     |   |       |        |
| Setback from the <b>South</b> Lot Line      | AX 450      | Feet |     | Setback from Wetland                                    |       | Feet   |
| Setback from the West Lot Line              | AX 160      | Feet |     | 20% Slope Area on property                              | Yes   | No     |
| Setback from the <b>East</b> Lot Line       | AX 25       | Feet |     | Elevation of <b>Floodplain</b>                          |       | Feet   |
| Setback to Septic Tank or Holding Tank      | AX 100      | Feet |     | Setback to Well   | 7     | Feet   |
| Setback to Drain Field                      | AX 46       | Feet | HA  |   |       |        |
|   |             | Feet | 118 |   |       |        |

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

#### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

| Issuance Information (County Use Only)  | Sanitary Number:   |   | # of bedrooms:                                   | Sanitary Date:           |  |  |  |  |  |
|---|--------------------|---|--|--------------------------|--|--|--|--|--|
| Permit Denied (Date):   | Reason for Denial: |   |  |                          |  |  |  |  |  |
| Permit #: 20 - 6102   | Permit Date: 6-9   | 7-20                                    |  |                          |  |  |  |  |  |
| Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes (Deed of Recoid   Yes (Fused/Contig | uous Lot(s)) 🗹 No  | Mitigation Required Mitigation Attached |  | Affidavit Required       |  |  |  |  |  |
| Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:  |                    | Previously Granted by                   | / Variance (B.O.A.)                              | #:                       |  |  |  |  |  |
|   | 0                  | Were Property Line                      | es Represented by Owner<br>Was Property Surveyed | Yes No                   |  |  |  |  |  |
| Profer to line staked   |                    | 10/1                                    |  | Zoning District (        |  |  |  |  |  |
| Date of Inspection: 6/4/20  | Inspected by:      |   |  | Date of Re-Inspection:   |  |  |  |  |  |
| Condition(s): Town, Committee or Board Conditions Att   | Builds or insta    | No they need to be attack               | ched.)   |                          |  |  |  |  |  |
| Signature of Inspector:   |                    | trest tre                               |  | Date of Approval: 6/4/20 |  |  |  |  |  |
| Hold For Sanitary: 🗆 Hold For TBA: 🗆  | Hold For Affic     | lavit: 🗆                                | Hold For Fees: 🗌                                 |                          |  |  |  |  |  |

## City, Village, State or Federal May Also Be Required

SANITARY SIGN SPECIAL CONDITIONAL BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

| No.       | 20-0102 |     |     |    | Issued | Issued To: Barnes Historical Association / John Amend, Agent |    |          |          |    |       |   |    |               |        |  |
|-----------|---------|-----|-----|----|--------|--|----|----------|----------|----|-------|---|----|---------------|--------|--|
|           |         |     |     |    |        |  |    |          |          |    |       |   |    |               |        |  |
| Location: | -       | 1/4 | of  | -  | 1/4    | Section  | 34 | Township | 45       | N. | Range | 9 | W. | Town of       | Barnes |  |
|           |         |     |     |    |        |  |    |          |          |    |       |   |    |               |        |  |
| Gov't Lot |         |     | p L | ot | 1      | Blo  | ck | Sul      | odivisio | n  |       |   |    | CSM# <b>1</b> | 104    |  |

For: Municipal Accessory Structure: [1- Story; Relocate Cabin (18' x 28') = 504 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

### Condition(s): Get required building inspections.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

### **Tracy Pooler**

Authorized Issuing Official

June 9, 2020

Date

## Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - 06-25S
SIGN SPECIAL - NA
CONDITIONAL - NA
BOA -



This permit may be void or revoked if any performance conditions are

not completed or if any conditions are violated.

## BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

| No: 06022001-2020   | )   | Tax ID: 3770  |                                      | Issued To: MATTHEW V & TARA K HE      |                           |  |  |
|---|---|---|--------------------------------------|---------------------------------------|---------------------------|--|--|
| Location: MOHAWK  |   | Section 18  | Township 45 N.                       | Range 09 W.                           | BARNES                    |  |  |
| Govt Lot 0  | Lot   | Block   |                                      | Subdivision: MOHAWK ADD TO POTAWATOMI | CSM# NA                   |  |  |
| For. Residential / Su   | ınroom / 24L x 10W  | / x 8H  |                                      |                                       |                           |  |  |
| Condition(s): Must  | contact local Unifor  | rm Dwelling Code (UDC) ins  | pection agency                       | and secure UDC permit if r            | equired by Statute or     |  |  |
| Contract.  NOTE: This permit  | <u> </u>  | rm Dwelling Code (UDC) insport of the autom |                                      |                                       | equired by Statute or     |  |  |
| Contract.  NOTE: This permit of construction  Changes in p                          | expires one year from the second one work or land use help blans or specifications. | om date of issuance if the an<br>nas not begun.<br>ons shall not be made witho  | uthorized<br>——                      | Rob Scl<br>Authorized Is              | hierman<br>suing Official |  |  |
| Contract.  NOTE: This permit of construction  Changes in pobtaining apapplication i | expires one year from work or land use help belongs or specification permit         | om date of issuance if the au   | uthorized<br>——<br>out<br>nny of the | Rob Scl<br>Authorized Is              | hierman                   |  |  |

(Disclaimer): Any future expansions or development requires additional permitting.

## Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - 11-104S
SIGN SPECIAL - NA
CONDITIONAL - NA
BOA -

## BAYFIELD COUNTY PERMIT



WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

Issued To: JANE A ANTON-MINGE Tax ID: 2048 No: 06022004-2020 **BARNES** Range 09 W. Township 44 N. Location: LOTS 1 & 3 V.2 CSM #216 IN Section 17 V.2 P.271 (LOCATED IN GOVT LOT 2) IN V.1065 P.930 SUBJ TO EASE 666B CSM# 216 Subdivision: Block Lot Govt Lot 0 For: Residential / Other / 18L x 12W x 8H Condition(s): Must contact local Uniform Dwelling Code (UDC) inspection agency and secure UDC permit if required by Statute or Contract. This permit expires one year from date of issuance if the authorized **Rob Schierman** NOTE: construction work or land use has not begun. **Authorized Issuing Official** Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the Tue Jun 09 2020 application information is found to have been misrepresented, erroneous, or incomplete. Date

This permit may be void or revoked if any performance conditions are

not completed or if any conditions are violated.

## Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - 11-104S
SIGN SPECIAL - NA
CONDITIONAL - na
BOA -



## BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

Issued To: JANE A ANTON-MINGE Tax ID: 2048 No: 06022006-2020 Location: LOTS 1 & 3 V.2 CSM #216 IN Township 44 N. Range 09 W. **BARNES** Section 17 V.2 P.271 (LOCATED IN GOVT LOT 2) IN V 1065 P.930 SUBJ TO EASE 666B Subdivision: CSM# 216 Block Lot Govt Lot 0 For Residential / Detached Garage / 30L x 30W x 9H Condition(s): Not to be used for human habitation. No water under pressure or plumbing fixtures unless said structure is permitted to be connected to a code compliant POWTS. NOTE: This permit expires one year from date of issuance if the authorized **Rob Schierman** construction work or land use has not begun. **Authorized Issuing Official** Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the Tue Jun 09 2020 application information is found to have been misrepresented, erroneous, or incomplete. Date

This permit may be void or revoked if any performance conditions are

not completed or if any conditions are violated.

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** 

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Authorized Agent:

Address to send permit

**APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN JUN 02 2020

20-0108 Permit #: Date: Amount Paid: ENTERED Refund:

| DO NOT START CONS   |   | ayfield County Zo  | ning Depa  | runent.   | Bayfield Co. Zoning   |                     | ST be submitted  | FILL OUT IN INK  | NO PENCIL)   |
|---|---|--|--|---|---|---------------------|--|--|--|
| TYPE OF BERLUE  | DE 01150  |  |  |   |   |                     |  |  | ito i citole,  |
| TYPE OF PERMIT F<br>Owner's Name:   | REQUES  | TED→   | □ LAN  | MALE TONY THE RESERVE TO THE PERSON OF THE P                                      |   | □ CONDITION.        |  | L USE   B.O.A.   | ☐ OTHER  |
| Droid 211   | 110 2   | JoHn   | Hoff   | man JR  | ailing Address:<br>213 Elm S  | THE PERSON NAMED IN | City/State/Zip:  | 11 1 7 701   | Telephone: 920 - 597                                 |
| Address of Property   |   | -0   | -  | manon   | City/State/Zip:   |                     | Brandoni   | Wi 53919   | 0028   |
| X   | 1 4   | ake, Bal   | 0  |   | Gan 5   | TIME WIT            | 54873  |  | Cell Phone:  |
| · Contractor:   |   | - P-A  |  | Co  | ontractor Phone:  | Plumber:            | 3/0/   |  | Plumber Phone:                                       |
|   |   |  |  |   |   | 1                   |  |  |  |
| Authorized Agent: (   | (Person Sign  | ning Application on  | behalf of O  | wner(s)) A  | gent Phone:   | Agent Mailir        | ng Address (include Cit  | y/State/Zip):  | Written  |
|   |   |  |  | 1.  |   |                     |  |  | Authorization  |
|   |   |  |  | 2.4   |   |                     |  |  | Attached   |
| PROJECT   | Marine St.  |  |  |   | Tax ID#   | 1                   |  | Recorded Document:   | ☐ Yes ☐ No (Showing Ownership)                       |
| LOCATION  | Legal   | Description: (   | Jse Tax St   | atement)  | 3   | 14.3                |  | 2009 R   | 527 336  |
| NIC   | c. 7  | Gov'   | Lot  | Lot(s) CSN  | 1 Vol & Page CSN  | 1 Doc# Lo           | t(s) # Block #   | Subdivision:   |  |
| _ NE_1/4,   | >W 1  | 1/4  |  |   |   | . 200               | Slock #  | Subdivision.   |  |
| 2.0   | /   | 118  |  |   | Town of:  |                     |  | Lat Char   |  |
| Section   | , Tow   | nship  | N, Range   | w   | 10wirol.  | arnes               |  | Lot Size   | Acreage  |
|   |   |  |  |   |   |                     |  |  | 7-   |
|   |   | roperty/Land \<br>cor Landward s   |  |   | Stream (incl. Intermittent)  If yescontinue   | Distance Struc      | cture is from Shoreli  | to Plancheter  | Are Wetlands   |
| Shoreland —   |   |  |  |   |   |                     |  | feet Zone?   | Present?   |
|   | ☐ ☐ Is P  | roperty/Land v   | ithin 100  |   | Pond or Flowage   | Distance Struc      | cture is from Shoreli  | 162  | ☐ Yes  |
|   |   | ×  |  |   | If yescontinue ->   |                     |  | feet No  | ∂ □ No   |
| Non-Shoreland   |   |  |  |   |   |                     |  |  |  |
| Value at Time   |   |  | Maria baras  |   |   |                     | ON THE STATE OF THE REST   |  | West and the second second second                    |
| of Completion   |   |  |  |   |   | Total # of          | The second secon | hat Type of  | Type of  |
| * include   |   | Project  |  | Project   | Project   | bedrooms            |  | Sanitary System(s)   | Water  |
| donated time  |   |  | *  | of Stories  | Foundation  | on                  |  | the property or  | on   |
| & material  | 7 Nous  | Camatania  | ×/   | 1 (1  |   | property            | E STATE OF THE STA | on the property?   | property   |
| <del> </del>  | New   | Construction   |  | 1-Story   | ☐ Basement  | 1                   | Municipal/Cit  |  | ☐ City   |
|   | ☐ Addit   | ion/Alteratio  | n   🗆  | 1-Story +<br>Loft   | ☐ Foundation  | 2                   | (New) Sanita   | ry Specify Type:   | Well   |
| \$ (1 0 0 0 0 0 0   |   |  | -  | LOIL  |   |                     | - In .   |  |  |
| 9,000,00  | ☐ Conv  | ersion   |  | 2-Story   | ☐ Slab  | <b>3</b>            | Sanitary (Exis   | ts) Specify Type:  |  |
| Will  | Reloc   | ate (existing bld  | g) 🗆   |   |   |                     |  | Vaulted (min 20  | O collen)  |
| PUT !   |   | Business on  | 6/   |   | Use   | 7.                  | Portable (w/s  |  | o gallon)  |
| gravel  |   |  |  |   |   | NONE                |  |  |  |
|   | Prope   | erty   |  |   |   | None                |  |  |  |
| down  | Prope   | erty   |  |   | ☐ Year Round  | None                | Compost Toil   |  | ,  |
| down  |   |  |  |   | ☐ Year Round  ▼ Seastnæl  | None                |  |  |  |
| Existing Structure  | e: (if add  | ition, alteration o  |  | s is being applied  | ☐ Year Round  ▼ Seastnæl  | None                | Compost Toil   |  |  |
|   | e: (if add  | ition, alteration o  |  | s is being applied  | ☐ Year Round  ▼ Seastnæl  | None                | Compost Toil None  | et   |  |
| Existing Structure  | e: (if add  | ition, alteration o  |  | s is being applied  | ☐ Year Round  ▼ See See Company  for) Length:   | None                | Compost Toil None Width:   | et<br>Height   |  |
| Existing Structure  | e: (if add  | ition, alteration o  |  | s is being applied  | ☐ Year Round  ▼ See See Company  for) Length:   |                     | Compost Toil None Width:   | et<br>Height   | Square   |
| Existing Structure Proposed Constr  | e: (if add  | (overall dimen   | nsions)  |   | ☐ Year Round  ▼ Season®  for) Length: Length:  Proposed Structu   |                     | Compost Toil None Width:   | Height Height Dimensions   |  |
| Existing Structure Proposed Constr  | e: (if add  | (overall dimension of the control of | nsions)<br>ipal Stru   | <b>cture</b> (first st  | Year Round  Season@  for) Length: Length: Proposed Structuructure on property)  |                     | Compost Toil None Width:   | Height Height Dimensions ( X                                     | Square   |
| Existing Structure Proposed Constr  | re: (if addiruction:  | (overall dimension of the control of | ipal Stru  | cture (first st   | ☐ Year Round  ▼ Season®  for) Length: Length:  Proposed Structu   |                     | Compost Toil None Width:   | Height Height Dimensions ( X ( X                                 | Square   |
| Existing Structure Proposed Constr  | re: (if addiruction:  | (overall dimension of the control of | ipal Stru<br>ence (i.e<br>w  | cture (first st<br>e. cabin, hunti<br>rith Loft   | Year Round  Season@  for) Length: Length: Proposed Structuructure on property)  |                     | Compost Toil None Width:   | Pet Height Height  Dimensions  ( X  ( X  ( X                     | Square   |
| Existing Structure Proposed Constr  | re: (if addiruction:  | (overall dimension of the control of | ipal Stru<br>ence (i.e<br>w  | cture (first st<br>e. cabin, hunti<br>rith Loft<br>rith a Porch   | Year Round   Yea  |                     | Compost Toil None Width:   | Dimensions  ( X ( X ( X  | Square   |
| Existing Structure Proposed Constr  | re: (if addiruction:  | (overall dimension of the control of | ipal Stru<br>lence (i.e<br>w<br>w  | cture (first st<br>cabin, hunti<br>with Loft<br>with a Porch<br>with (2 <sup>nd</sup> ) Porcl   | Year Round   Yea  |                     | Compost Toil None Width:   | Dimensions  ( X ( X ( X ( X                                      | Square   |
| Proposed Constr   | re: (if add<br>ruction:<br>se   | (overall dimension of the control of | ipal Struence (i.e   | cture (first st<br>e. cabin, hunti<br>vith Loft<br>vith a Porch<br>vith (2 <sup>nd</sup> ) Porcl<br>vith a Deck   | Year Round  Season a  for) Length: Length:  Proposed Structu ructure on property) ng shack, etc.)   |                     | Compost Toil None Width:   | Dimensions  ( X ( X ( X ( X ( X                                  | Square   |
| Existing Structure Proposed Constr  | re: (if add<br>ruction:<br>se   | (overall dimension of the control of | ipal Stru<br>lence (i.e<br>w<br>w  | cture (first st<br>e. cabin, hunti<br>rith Loft<br>rith a Porch<br>rith (2 <sup>nd</sup> ) Porcl<br>rith a Deck<br>rith (2 <sup>nd</sup> ) Deck   | Year Round   Yea  |                     | Compost Toil None Width:   | Height Dimensions  ( X ( X ( X ( X ( X ( X ( X                   | Square   |
| Proposed Constr   | re: (if add<br>ruction:<br>se   | overall dimer  | ipal Stru<br>lence (i.e<br>w<br>w<br>w   | cture (first st<br>cabin, huntivith Loft<br>with a Porch<br>with (2 <sup>nd</sup> ) Porcl<br>with a Deck<br>with (2 <sup>nd</sup> ) Deck<br>with Attached   | Year Round   Yea  | re                  | None  Width:  Width:   | Height Height  Dimensions  ( X ( X ( X ( X ( X ( X ( X ( X ( X ( | Square   |
| Proposed Constr   | re: (if add<br>ruction:<br>se   | Overall dimer  | ipal Stru<br>ence (i.e<br>w<br>w<br>w<br>w   | cture (first step cabin, hunting ith Loft with a Porch with (2nd) Porch with a Deck with (2nd) Deck with Attached (1) (   sanitary, contact   sanitary, contact   sanitary, contact   cont                                      | Tyear Round  Season (a)  For)  Length:  Proposed Structure on property) Ing shack, etc.)  Garage  or □ sleeping quarters,   | or □ cooking &      | Compost Toil None Width: Width:  | Height Dimensions  ( X ( X ( X ( X ( X ( X ( X ( X ( X (         | Square   |
| Proposed Constr   | re: (if add<br>ruction:<br>se   | Overall dimension of the control o   | ipal Stru<br>ence (i.e<br>w<br>w<br>w<br>w<br>w<br>house w   | cture (first st<br>e. cabin, huntil<br>rith Loft<br>rith a Porch<br>rith (2 <sup>nd</sup> ) Porcl<br>rith a Deck<br>rith (2 <sup>nd</sup> ) Deck<br>rith Attached   | Year Round   Yea  | or □ cooking &      | Compost Toil None Width: Width:  | Height Height  Dimensions  ( X ( X ( X ( X ( X ( X ( X ( X ( X ( | Square   |
| Proposed Constr   | re: (if addiruction: sse Use  | Overall dimension of coverall dimension of the coveral dimension of the coverage dimension of the cover   | ipal Stru ence (i.e w w w w house w le Home  | cture (first st<br>e. cabin, huntil<br>rith Loft<br>rith a Porch<br>rith (2 <sup>nd</sup> ) Porcl<br>rith a Deck<br>rith (2 <sup>nd</sup> ) Deck<br>rith Attached   | Year Round   Yea  | or □ cooking &      | Compost Toil None Width: Width:  | Height  Dimensions  ( X ( X ( X ( X ( X ( X ( X ( X ( X (        | Square   |
| Existing Structure Proposed Constr  Proposed Us  Residential  | re: (if addiruction: sse Use  | Overall dimension of coverall dimension of the coveral dimension of the coverage dimension of the cover   | ipal Stru ence (i.e w w w w house w le Home  | cture (first st<br>e. cabin, huntil<br>rith Loft<br>rith a Porch<br>rith (2 <sup>nd</sup> ) Porcl<br>rith a Deck<br>rith (2 <sup>nd</sup> ) Deck<br>rith Attached   | Year Round   Yea  | or □ cooking &      | Compost Toil None Width: Width:  | Height  Dimensions  ( X ( X ( X ( X ( X ( X ( X ( X ( X (        | Square Footage ) ) ) ) ) ) ) ) ) ) ) ) ) )           |
| Existing Structure Proposed Constr  Proposed Us  Residential  | re: (if addiruction: sse Use  | Princ   Resident   R   | ipal Stru ence (i.e w w w w house w le Home cion/Alte  | cture (first steament) cith Loft with a Porch with (2 <sup>nd</sup> ) Porch with a Deck with (2 <sup>nd</sup> ) Deck with Attached company (a company) company (a company) company (a company)  | Year Round   Yea  | or □ cooking &      | Compost Toil None Width: Width:  | Height Height  Dimensions  (                                     | Square Footage ) ) ) ) ) ) ) ) ) ) ) ) ) )           |
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| Existing Structure Proposed Constr  Proposed Us  Residential  Commercial  Municipal U  I (we) declare that this a (are) responsible for the result of Bayfield Count property at any reasonal | Use  Use  Jse  application (ie detail and it yr velying on abble time for   | Bunk  Bunk  Acce  Cond  Cond  Cond  Acce  Cond   | ipal Stru lence (i.e.  W W W w house w le Home sion/Alte sory Bu al Use: (i itional U r: (explair carying information I (we) cary | cture (first st c. cabin, huntivith Loft vith a Porch vith (2 <sup>nd</sup> ) Porcl vith a Deck vith (2nd) Deck vith Attached (   | TARTING CONSTRUCTION Variation by Indicate the last of the last o | or cooking &        | Food prep facilities)  Will RESULT IN PENAL dge and belief it is true, corermining whether to issue a reged with administering course.   | Height Height  Dimensions  (                                     | Square Footage  ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )  |

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date

w or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** Show / Indicate: North (N) on Plot Plan Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road) Show: All Existing Structures on your Property Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (6) Show any (\*): (7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20% 1 septic d to be taken down I taken down And Reflaced with New one

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

New Shed will

Changes in plans must be approved by the Planning & Zoning Dept.

| Description   | Setback<br>Measurements             |       | Description  | Setback<br>Measurements             |
|---|-------------------------------------|-------|--|-------------------------------------|
|   |                                     |       |  |                                     |
| Setback from the <b>Centerline of Platted Road</b>                        | Feet                                |       | Setback from the <b>Lake</b> (ordinary high-water mark)                      | Feet                                |
| Setback from the Established Right-of-Way                                 | Feet                                |       | Setback from the River, Stream, Creek  | Feet                                |
| 100   | No.                                 |       | Setback from the Bank or Bluff   | Feet                                |
| Setback from the <b>North</b> Lot Line                                    | /co / Feet                          |       |  |                                     |
| Setback from the <b>South</b> Lot Line                                    | '80 Feet                            |       | Setback from Wetland   | Feet                                |
| Setback from the <b>West</b> Lot Line                                     | 200 Feet                            |       | 20% Slope Area on the property   | ☐ Yes ☐ No                          |
| Setback from the <b>East</b> Lot Line                                     | 100 Feet                            |       | Elevation of <b>Floodplain</b>   | Feet                                |
| Setback to Septic Tank or Holding Tank                                    | 40 Feet                             |       | Setback to <b>Well</b>   | F                                   |
| Setback to Drain Field  | 70 Feet                             |       | Setuation well   | Feet                                |
| Setback to Privy (Portable, Composting)                                   | Feet                                |       |  |                                     |
| Prior to the placement or construction of a structure within ten (10) fee | et of the minimum required setback, | the b | oundary line from which the setback must be measured must be visible from on | e previously surveyed corner to the |

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

|   | 1                       | 4   |  |  |
|---|-------------------------|---|--|--|
| Issuance Information (County Use Only)  | Sanitary Number:        |   | # of bedrooms:                                   | Sanitary Date:                                   |
| Permit Denied (Date):   | Reason for Denial:      |   |  |  |
| Permit #: 20-0108   | Permit Date: 611-       | -2000                                       |  |  |
| Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes (Deed of Recor   Yes (Fused/Contigue)   Yes   Yes | d)                      | Mitigation Required<br>Mitigation Attached  | ☐ Yes ☐ No ☐ Yes ☐ No                            | Affidavit Required                               |
| Granted by Variance (B.O.A.)  □ Yes   Case #:   |                         | Previously Granted by                       | / Variance (B.O.A.)                              | :#:  |
|   |                         | Were Property Line                          | es Represented by Owner<br>Was Property Surveyed | ✓ Yes □ No □ Yes □ No                            |
| Inspection Record:  |                         | 1   |  | Zoning District ( P ) Lakes Classification ( P ) |
| Date of Inspection: 6/4/20  | Inspected by:           |   |  | Date of Re-Inspection:                           |
| Condition(s): Town, Committee or Board Conditions Atta  | ched?   Yes   No - (IF) | No they need to be atta<br>In Hab, the time | or Sleeping                                      |  |
| Signature of Inspector:   |                         |   |  | Date of Approval:                                |
| Hold For Sanitary:  Hold For TBA:   | Hold For Affic          | davit:                                      | Hold For Fees:                                   | _ □  |

## city, Village, State or Federal May Also Be Required

ND USE - X NITARY -IGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

| No.                   | 20-0108 Issued To: David Zills & John Hoffman |     |    |     |     |         |    |          |    |           |       |   |    |         |        |  |
|-----------------------|---|-----|----|-----|-----|---------|----|----------|----|-----------|-------|---|----|---------|--------|--|
| W 1/4 of<br>Location: | NE  | 1/4 | of | SW  | 1/4 | Section | 34 | Township | 45 | N.        | Range | 9 | W. | Town of | Barnes |  |
|                       |   |     |    |     |     |         |    |          |    |           |       |   |    |         |        |  |
| Gov't Lot             |   | Lot |    | .ot | ВІ  |         | ck | sk Su    |    | bdivision |       |   |    | CSM#    |        |  |
|                       |   |     |    |     |     |         |    |          |    |           |       |   |    |         |        |  |

For: Residential Accessory Structure: [ 1- Story; Garage (12' x 32') = 384 sq. ft. ]

(Disclaimer): Any future expansions or development would require additional permitting.

#### Condition(s): Not to be used for human habitation.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

#### **Tracy Pooler**

Authorized Issuing Official

June 11, 2020

Date